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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/629,037
	Filing Date	08/30/2006
	First Named Inventor	LEE R. BROWN
	Art Unit	3735
	Examiner Name	Gilbert, Laura/A.
	Attorney Docket Number	5359

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to: *Lee Brown*
23344 Abroad Ave.
Pier Charlotte,
Florida
33980

☐ The address associated with Customer Number:

OR

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Lee R. Brown</i>		
Name	LEE R. BROWN		
Date	08/24/2006	Telephone	941. 629. 6771

NOTE: Signatures of all the inventors or assignees of record of the entire interest (or their representative(s)) are required. Submit multiple forms if more than one signature is required, see below.

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Revoke Power of Attorney n/a Charles Bodsky Esq. et al